

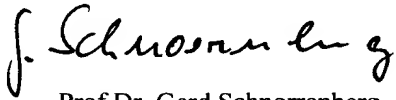
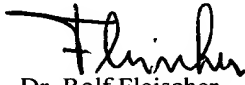


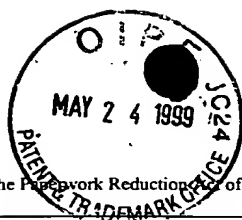
<b>REISSUE APPLICATION DECLARATION BY THE ASSIGNEE</b>		Docket Number: 5/891-1-C1 Reissue
<p>We hereby declare that: My residence, post office address and citizenship are stated below next to my name. We are authorized to act on behalf of the following company: Dr. Karl Thomae GmbH and the title of my position with said company is: The entire title to the patent identified below is vested in said company.</p>		
Name of Patentee: Wolfgang GRELL, Rudolf HURNAUS, Gerhart GRISS (By Elizabeth GRISS, Executrix), Robert SAUTER, Manfred REIFFEN and Eckhard RUPPRECHT		
Patent Number: 5,216,167	Date Patent Issued: June 1, 1993	
Title of Invention: PHENYLACETIC ACID BENZYLAMIDES		
<p>We believe said patentee to be the original, first and sole or joint inventor(s) of the subject matter which is described and claimed in said patent, for which a reissue patent is sought on the invention entitled:</p> <p style="text-align: center;">PHENYLACETIC ACID BENZYLAMIDES</p> <p>the specification of which</p> <p><input type="checkbox"/> is attached hereto.</p> <p><input checked="" type="checkbox"/> was filed on October 7, 1997, as reissue application number <u>08/946,602</u>. and was or will be amended on</p> <p>We have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.</p> <p>We acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56.</p> <p>We verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)</p> <p><input type="checkbox"/> by reason of a defective specification or drawing, said defects being described below.</p> <p><input checked="" type="checkbox"/> by reason of the patentee claiming more or less than he had the right to claim in the patent, said excess or insufficiency in the claims being specified below.</p> <p><input type="checkbox"/> by reason of other errors, described below.</p> <p>The errors relied upon in the above statement, and how the errors occurred, are as follows:</p> <p>The terminal disclaimer filed on August 6, 1992, in connection with U.S. Serial No. 07/495,820, the application from which U.S. Patent No. 5,216,167 issued, disclaimed only the term of any patent issuing from that application subsequent to October 10, 2006, <i>i.e.</i>, the expiration date of U.S. Patent No. 4,873,080. However, both U.S. Patent Nos. 4,873,080 and 4,863,724 are owned by assignee Dr. Karl Thomae GmbH, and both disclose and claim subject matter relating to repaglinide. Thus, in an abundance of caution, the assignee believes that U.S. Patent No. 5,216,167 should be terminally disclaimed over both U.S. Patent Nos. 4,873,080 and 4,863,724. Accordingly, a terminal disclaimer which disclaims the term of U.S. Patent No. 5,216,167 subsequent to September 5, 2006, <i>i.e.</i>, the expiration date of U.S. Patent No. 4,863,724, is submitted herewith.</p>		

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(REISSUE APPLICATION DECLARATION BY THE ASSIGNEE, page 2)				Docket No.: 5/891-1-C1 Reissue	
The errors described above arose without any deceptive intention on the part of the applicant.					
I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the patent and Trademark Office connected therewith.					
Name(s) Robert P. Raymond Mary-Ellen M. Devlin Alan R. Stempel Anthony P. Bottino			Registration No.: 25,089 27,928 28,991 41,629		
Correspondence Address: Direct all communications about the application to:					
<input type="checkbox"/> Customer Number		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> →		<div style="border: 1px solid black; padding: 5px; width: 150px; margin: 0 auto;"> <i>Place Customer Number Bar Code Label here</i> </div>	
Type Customer Number Here					
<b>OR</b>					
<input checked="" type="checkbox"/> Firm or Individual Name		Boehringer Ingelheim Corp. Attn: Dr. R.P. Raymond			
Address		900 Ridgebury Road, P.O. Box 368			
Address					
City		Ridgefield	State	CT	Zip
Country		US			
Telephone		(203) 798-4864	Fax	(203) 798-4408	
We, representing the assignee, hereby consent to the filing of a reissue application.					
We hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.					
Full name of person signing (given name, family name)			Full name of person signing (given name, family name)		
Signature ppa.  Prof. Dr. Gerd Schnorrenberg			Signature ppa.  Dr. Rolf Fleischer		
Date: 14 April 1999			Date: 14 April 1999		
Residence: Hugo-Häring-Straße 78/2 D-88400 Biberach, Germany			Residence: Alpenstraße 29 D-88400 Biberach, Germany		
Citizenship: german			Citizenship: german		
Post Office Address: see above			Post Office Address: see above		




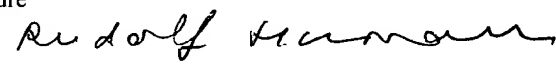
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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

<b>REISSUE APPLICATION DECLARATION BY THE INVENTOR</b>	<b>Docket Number (Optional)</b> 5/891-1-C1 Reissue
<p>As a below named inventor, I hereby declare that: My residence, post office address and citizenship are stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed in patent number <u>5,216,167</u>, granted <u>June 1, 1993</u>, and for which a reissue patent is sought on the invention entitled:</p> <p><b>PHENYLACETIC ACID BENZYLAMIDES</b></p> <p>the specification of which</p> <p><input type="checkbox"/> is attached hereto</p> <p><input checked="" type="checkbox"/> was filed on <u>October 7, 1997</u>, as reissue application number <u>08/946,602</u> and was or will be amended on _____ (if applicable)</p> <p>I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability is defined in 37 CFR 1.56. I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)</p> <p><input type="checkbox"/> by reason of a defective specification or drawing.</p> <p><input checked="" type="checkbox"/> by reason of the patentee claiming more or less than he had the right to claim in the patent.</p> <p><input type="checkbox"/> by reason of other errors.</p> <p>At least one error upon which reissue is based is described as follows:</p> <p>The terminal disclaimer filed on August 6, 1992, in connection with U.S. Serial No. 07/495,820, the application from which U.S. Patent No. 5,216,167 issued, disclaimed only the term of any patent issuing from that application subsequent to October 10, 2006, <i>i.e.</i>, the expiration date of U.S. Patent No. 4,873,080. However, both U.S. Patent Nos. 4,873,080 and 4,863,724 are owned by assignee Dr. Karl Thomae GmbH, and both disclose and claim subject matter relating to repaglinide. Thus, in an abundance of caution, the assignee believes that U.S. Patent No. 5,216,167 should be terminally disclaimed over both U.S. Patent Nos. 4,873,080 and 4,863,724. Accordingly, a terminal disclaimer which disclaims the term of U.S. Patent No. 5,216,167 subsequent to September 5, 2006, <i>i.e.</i>, the expiration date of U.S. Patent No. 4,863,724, is submitted herewith.</p>	

(Page 1 of 3)

Burden Hour Statement: This form is estimated to take 0.5 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Office, Patent and Trademark Office, Washington, DC 20231.

(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)					Docket Number (Optional) 5/891-1-C1 Reissue											
<p>All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 45%;">Name(s)</th> <th style="text-align: left; width: 55%;">Registration Number</th> </tr> </thead> <tbody> <tr> <td>Dr. Robert P. Raymond</td> <td>25,089</td> </tr> <tr> <td>Mary-Ellen M. Devlin</td> <td>27,928</td> </tr> <tr> <td>Alan R. Stempel</td> <td>28,991</td> </tr> <tr> <td>Anthony P. Bottino</td> <td>41,629</td> </tr> </tbody> </table>							Name(s)	Registration Number	Dr. Robert P. Raymond	25,089	Mary-Ellen M. Devlin	27,928	Alan R. Stempel	28,991	Anthony P. Bottino	41,629
Name(s)	Registration Number															
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Mary-Ellen M. Devlin	27,928															
Alan R. Stempel	28,991															
Anthony P. Bottino	41,629															
<p>Correspondence Address: Direct all communications about the application to:</p> <div style="display: flex; align-items: flex-start;"> <div style="flex: 1;"> <input type="checkbox"/> Customer Number <div style="border: 1px solid black; width: 150px; height: 30px; margin-top: 5px;"></div> </div> <div style="flex: 1; border: 1px solid black; padding: 5px; margin-left: 10px;"> <p style="font-size: small; text-align: center;">Place Customer Number Bar Code Label here</p> </div> </div> <p><b>OR</b></p> <div style="border: 1px solid black; width: 150px; height: 30px; margin-top: 5px; text-align: center; font-size: x-small;">Type Customer No. here</div>																
<input checked="" type="checkbox"/> Firm or Individual Name	Boehringer Ingelheim Corporation Attn: Dr. R.P. Raymond															
Address	900 Ridgebury Road, P.O. Box 368															
Address																
City	Ridgefield	State	CT	ZIP	06877-0368											
Country	US															
Telephone	203-798-4866		FAX	203-791-6183												
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.</p>																
<p>Full name of sole or first inventor (given name, family name) Wolfgang GRELL</p>																
<p>Inventor's signature </p>																
Residence: Geschwister-Scholl-Straße 18 D-88400 Biberach, Germany			Date 4 / 21 / 1999													
Post Office Address: see above			Citizenship: german													
<p>Full name of second or joint inventor (given name, family name) Rudolf HURNAUS</p>																
<p>Inventor's signature </p>																
Residence: Silcherstraße 19 D-88400 Biberach, Germany			Date 4 - 16 - 1999													
Post Office Address: see above			Citizenship: german													
<input checked="" type="checkbox"/> Additional joint inventors are named on separately numbered sheets attached hereto.																

(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 3)		Docket Number (Optional) 5/891-1-C1 Reissue
Full name of third or joint inventor (given name, family name) Gerhart GRISS (By Elizabeth GRISS, Executrix)		
Inventor's signature <i>Elizabeth Griss</i>		
Residence: Schopperweg 1 D-88400 Biberach, Germany	Date <i>4-23-1999</i>	
Post Office Address: see above	Citizenship: german	
Full name of sole or first inventor (given name, family name) Robert SAUTER		
Inventor's signature <i>Robert Sauter</i>		Date <i>4 / 28 / 99</i>
Residence: Albert-Schweitzer-Weg 9 D-88471 Laupheim, Germany	Citizenship: german	
Post Office Address: see above		
Full name of second or joint inventor (given name, family name) Manfred REIFFEN		
Inventor's signature <i>Manfred Reiffen</i>		Date <i>4 / 19 / 99</i>
Residence: Matthias-Erzberger-Straße 40 D-88400 Biberach, Germany	Citizenship: german	
Post Office Address: see above		
Full name of third or joint inventor (given name, family name) Eckhard RUPPRECHT		
Inventor's signature <i>Eckhard Rupprecht</i>		Date <i>5 / 6 / 1999</i>
Residence: In den Weinbergen 9 A-2353 Guntramsdorf, Austria	Citizenship: german	
Post Office Address: see above		
<input checked="" type="checkbox"/> Additional joint inventors are named on separately numbered sheets attached hereto.		